FORM 990	GAIN	(LOSS)	FROM	SALE	OF OT	HER	ASSETS		STA	TEMENT	6
DESCRIPTION					DAT ACQUI		DAT SOI	-	ETH QUI	OD RED	
FURNITURE AND E	QUIPMENT				VARIO	บร	VARIO	ous Pu	JRCH	ASED	
NAME OF BUYER		GROSS SALES PI			ST OR R BASIS		PENSE SALE	DEPREC	2	NET GA	
		6,9	990.		9,463.	•	0.	2,83	38.	3(65.
TO FM 990, PART	I, LN 8	6,9	990.		9,463		0.	2,83	38.	30	65.
FORM 990			O 7	THER I	EXPENSI	===== ES			STA	TEMENT	7
		(A)	•		(B) PROGRAM		MANAC	(C) MANAGEMENT		(D)	
DESCRIPTION		тоти	AL		SERVI	CES	AND	SENERAL	FU	NDRAISI	NG —
BANK SERVICES DATA PROCESSING			7,904 0,925			714.		28,957.		156,2	33.
MEMBERSHIP FEES		4	5,662	2.		525.	E Maria	41,701		3,4	36.
PREMIUMS FACILITIES MAIN' PROFESSIONAL	T.		5,350 8,65!			,350. ,779.	1 H. T		٠.	2,7	07.
SERVICES		3,18			2,416	,557.	T K.A.	264,102.		500,9	06.
INSURANCE PUBLICITY			6,029 4,936		236	,724.		96,029. 193.		18,0	19.
UTILITIES		250	0,192	2.		903.		101,289.		-	
DONOR MAINTENAN	CE	1,16	3,680	б.			- 3 2 3	3 11/2 x 3		1,163,6	86.
TOTAL TO FM 990	, LN 43	5,90	4,904	<u> </u>	3,416	,152.		543,765.		1,844,9	87.
FORM 990		NON-G	OVERI	NMENT	SECUR	TTIES	······································		STA	ATEMENT	<u></u> в
DESCRIPTION	VALUE METHOD	CORPO			ORATE	PUB TR	HER LICLY ADED RITIES	OTHER SECURIT	IES	TOTAL NON-GO SECURIT	V'T
CORPORATE BONDS COMMON STOCK OTHER					6,040.		7,914.	100,00		2,466,0 1,817,9 100,0	40. 14.
TO FM 990, LN 5	4 COL B			2,46	6,040.	1,81	7,914.	100,0	00.	4,383,9	54.

FORM 990	GOVER	STATEMENT	9		
VALUA DESCRIPTION METH		U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV SECURITI	
GOVERNMENT BONDS MARKET	VALUE	854,088.		854,0	88.
TOTAL TO FORM 990, LINE 54,	COL B	854,088.		854,0	88.
FORM 990	OTHER	INVESTMENTS		STATEMENT	10
DESCRIPTION			VALUATION METHOD	AMOUNT	ı
CHARITABLE REMAINDER ANNUITY INVESTMENT IN LLC	TRUST		COST MARKET VALUE	934,2 2,200,6	
TOTAL TO FORM 990, PART IV,	TIME EC			2 124 0	
TOTAL TO FORM 990, PART TV,	TIME 20	, COLUMN B		3,134,9	27.
FORM 990 DEPRECIATION C		· · · · · · · · · · · · · · · · · · ·	RINVESTMENT	STATEMENT	····
	OF ASSET	· · · · · · · · · · · · · · · · · · ·	ACCUMULATED DEPRECIATION		11
FORM 990 DEPRECIATION C	OF ASSET	S NOT HELD FOR	ACCUMULATED	STATEMENT	11 E 62.
FORM 990 DEPRECIATION CONTROL OF	OF ASSET	COST OR OTHER BASIS 7,508,809. 19,635,373.	ACCUMULATED DEPRECIATION 3,633,147. 13,986,901.	STATEMENT BOOK VALU 3,875,6 5,648,4	11 E 62. 72.
FORM 990 DEPRECIATION CONTROL OF	DF ASSET	COST OR OTHER BASIS 7,508,809. 19,635,373. 825,540.	ACCUMULATED DEPRECIATION 3,633,147. 13,986,901. 0.	BOOK VALU 3,875,6 5,648,4 825,5	111 62. 72. 40.
FORM 990 DEPRECIATION OF DESCRIPTION BUILDINGS EQUIPMENT LAND TOTAL TO FORM 990, PART IV,	DF ASSET	COST OR OTHER BASIS 7,508,809. 19,635,373. 825,540. 27,969,722.	ACCUMULATED DEPRECIATION 3,633,147. 13,986,901. 0.	BOOK VALU 3,875,6 5,648,4 825,5	111 62. 72. 40.
FORM 990 DEPRECIATION OF DESCRIPTION BUILDINGS EQUIPMENT LAND TOTAL TO FORM 990, PART IV,	LN 57	COST OR COST OR OTHER BASIS 7,508,809. 19,635,373. 825,540. 27,969,722.	ACCUMULATED DEPRECIATION 3,633,147. 13,986,901. 0.	STATEMENT BOOK VALU 3,875,6 5,648,4 825,5 10,349,6 STATEMENT	11 62. 72. 40.

FORM 990	OTHER	REVENUE	NOT	INCLUDED	ON	FORM	990	STATEMENT	13
DESCRIPTION								TRUOMA	
RENTAL EXPENSES	FROM 990	PART 1,	LIN	E 6B				222,0	13.
TOTAL TO FORM 9	90, PART	IV-A						222,0	13.
FORM 990	OTHER	EXPENSE	S NO	T INCLUDE	D 01	N FOR	M 990	STATEMENT	14
DESCRIPTION								AMOUNT	
DENTAL EYDENCES	FROM 990	PART 1,	LIN	Е 6В				222,0	13.
NUMBER ENFLIGED								•	

OREGON PUBLIC BROADCASTING BOARD OF DIRECTORS

7140 SW Macadam Avenue, Portland, OR 97219-3099 (503) 244-9900

William R. Swindells, Chair (02)
920 SW Sixth, Suite 1350
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541/440-4692 Fax: 541/677-3296
rasmith@reseact.net

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Executive Solutions
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tent@vinton.com

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OPB Lisison Brian R. Sickora OPB Exec. Vice President 503/293-1900 Fax: 293-4165

(Term ands June 30 of designated year)
ophbourd/roster; updated 09/11/00
*State Appointers

The above persons receive no compensation, retirement contribution, or expense account allowances. They serve on the Board of Directors on a part-time basis.

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Rev. June 1998))			se, Income, Informati		กร	OMB No. 154	15-0148
epartment of the Some Se	Treasury		•	 File a separate application 	for each return.		1	
OFFICE PROPERTY SERVICES	Name		 _				Employer identifica	don number
ease type or		OREGO	ON PUBLIC	BROADCASTING			93 0814	
int. File the	Number			or P.O. box no. if mail is not dell	vered to street address)		, <u></u>	- -
riginal and one	B			y				
o py by the due	l	7140	S.W. MACI	ADAM AVENUE				
ite for filing our return.	City, toy			code. For a foreign address, se	e instructions.			
			LAND, OR	97219				
nie: Comom	te income to			7004 to request an extension	n of time to file. Partnemb	ine REMICS of		
				n of time to file Form 1065,		ع رفان ۱۱۱۱ اید در ود دو.	,_	
	an extension o				2001 to file (check	onk one).		
	706-GS(D)	I WING WITH		T (sec.401(a) or 408(a) trust)	1,0 1,00	D (sec. 4951 taxes		orm 8612
	706-GS(T)			T (trust other than above)	· Form 3520-A	•		orm 8613
	1990 or 990-E	7	Form 1041	•	Form 4720			om 8725
	n 990-BL	_	Form 1041	•	Form 5227			om 8804
	n 990-PF		Form 104		Form 6069		==	orm 8831
	-	not have ar		z Isiness in the United States, che			▶≓′	5.111 OU3 I
			other tax year beginn			UN 30,	2000	
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	•		•	for this tax year?			-	
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			t have examined this I am authorized to pi	form, including accompanying		nd to the best of m	ny itrowledge and	belief,
Signature 🕨				Title 🕨			Dale ►	
	AND ONE COP	Y. The IRS	will show below wh	ether or not your application is	approved and will return the	B COBY.	Date P	
			Completed by				_	
			n. Please attach th i s					
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We HAVI	E NOT approve	d your appl	lication. However, we	have granted a 10-day grace p				
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Application for Extension of Time To File Form 2758 Certain Excise, Income, Information, and Other Returns (Rev. June 1998) OMB No. 1545-0148 File a separate application for each return. Employer Identification numb Name Please type or OREGON PUBLIC BROADCASTING 93 0814638 print. File the Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address). original and one copy by the due 7140 S.W. MACADAM AVENUE date for bling City, town, or post office, state, and ZIP code. For a foreign address, see instructions. vout return. PORTLAND, OR 97219 Note: Corporate income tax return filers must use Form 7004 to request an extension of time to file. Partnerships, REMICS, and trusts must use Form 8735 to request an extension of time to file Form 1065, 1066, or 1041. FEBRUARY 15 2001 I request an extension of time until , to file (check only one): Form 8612 Form 706-GS(D) Form 990-T (sec.401(a) or 408(a) trust) Form 1120-ND (sec. 4951 taxes) Form 8613 Form 706-GS(T) Form 990-T (trust other than above) Form 3520-A X Form 990 or 990-E2 Form 4720 Form 8725 Form 1041 (estate) Form 990-BL Form 1041-A Form 5227 Form 8804 Form 6069 Form 8831 Form 990-PF Form 1042 If the organization does not have an office or place of business in the United States, check this box JUL 1, 1999 and ending 30, , or other fax year beginning 2a For calendar year b. If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period Has an extension of time to file been previously granted for this tax year? State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO OBTAIN THE INFORMATION NECESSARY IN ORDER TO FILE A COMPLETE AND ACCURATE RETURN. 5a If this form is for Form 706-GS(D), 706-GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720. 6069, 8612, 8613, 8725, 8804, or 8831, enter the tentative tax, less any nonrefundable credits. MODEL OF O. b. If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and sistemale vilaxigus in r estimated tax payments made. Include any prior year overpayment allowed as a credit. -सहरक्षण**ेद्ध वं**जन 6 Balance due. Subtract line 5b from line 5a. Include your payment with this form, or deposit with FTD. coupon if required. N/A Signature and Verification Under penalties of periony, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form Date > 10/25/20 Signature > aras Title 🏲 FILE ORIGINAL AND ONE COPY. The TRS will know below whether or not your application is approved and will return the copy. Notice to Applicant - To Be Completed by IRS We HAVE approved your application. Please attach this form to your return. _! We HAVE NOT approved your application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of your return (Including any prior extensions). This grace period is considered a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to your return. ■ We HAVE NOT approved your application. After considering your reasons stated in item 4, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period We cannot consider your application because it was filed after the due date of the return for which an extension was requested. Director If you want a copy of this form to be returned to an address other than that shown above, please enter the address to which the cold should be sent Please DELOITTE & TOUCHE LLP Type Number, street and room or suite no. (or P.O. box no. if mail is not delivered to street address) Ωŧ 111 SW 5TH, SUITE 3900 Print City, town, or post office, state, and ZIP code. For a foreign address, see instructions

PORTLAND, OREGON 97204-3698

LHA For Paperwork Reduction Act Notice, see separate instructions.

m 2758 (Rev 6-98)

Form 990.

Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust

OMB No. 1545-0047

Open to Public Inspection Department of the Treasury Note: The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service For the 1999 calendar year, OR tax year period beginning July 1 , 1999, and ending June 30 Check if: D Employer identification number C Name of organization Change of address use IRS CONNECTICUT PUBLIC BROADCASTING. INC 06-0758938 label or Initial return print or Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return type. 240 NEW BRITAIN AVENUE 860 278-5310 Amended return City or town, state or country, and ZIP+4 F Check ▶ ☐ if exemption application (required also for Instruc-HARTFORD CT 06106 is pending state reporting) Type of organization — ▶ 🔀 Exempt under section 501(c) (Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990). I If either box in H is checked "Yes," enter four-digit group exemption number (GEN) (b) If "Yes," enter the number of affiliates for which this return is filed: Accounting method: Cash X Accruat (c) Is this a separate return filed by an organization covered by a group ruling? . . Yes Other (specify) 🕨 Check here 🕨 🦳 if the organization's gross receipts are normally not more than \$25,000. The organization need not fife a return with the IRS; but if it received a Form 990 Package in the mail, it should life a return without financial data. Some states require a complete return. Note: Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year. Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 15.) Contributions, gilts, grants, and similar amounts received: 6,615,259 a Direct public support 15,153,924 406,494 c Government contributions (grants) d Total (add lines 1a through 1c) (attach schedule of contributors (cash \$24,914,315 noncash \$ 261,362) Statement 1 25,175,677 Program service revenue including government fees and contracts (from Part VII, line 93) Membership dues and assessments 3 31,523 92,843 c Net rental income or (loss) (subtract line 6b from line 6a) 6c 7 Other investment Income (describe ▶ 7 8a Gross amount from sales of assets other (A) Securities (B) Other 8a b Less: cost or other basis and sales expenses. 8b 8c c Gain or (loss) (attach schedule)..... ż a Gross revenue (not including \$ _ contributions reported on line 1a) 1,215,798 9а b Less: direct expenses other than fundraising expenses c Net income or (loss) from special events (subtract line 9b from line 9a) . . . <u>372,275</u> 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold Statement 3 10a 10b C Gross profit or (loss) from sales of inventoring a tach schedule) (subtract line 10b from line 10a) (154, 237)Other revenue (from Pan VII; line 103)

Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8429c, 10c, and 11)

Program services (from line 44 column (49))

Management and general (from line 44, column (10)) 11 364,312 12 25,882,393 12 18,677,826 13 14 3,336,204 14 Fundraising (from line-44 (collumn (D)) 1-1----15 2,987,095 15 Payments to affiliates (attach-schedule)..... 001,125 17 Total expenses (add lines 16 and 44, column (A)) 17 881,268 18 18 559,786 Net assets or fund balances at beginning of year (from line 73, column (A)) 19

For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

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Other changes in net assets or fund balances (ettach explanation) Statement 4

Net assets or fund balances at end of year (combine lines 18, 19, and 20) ______

, 367 , 684 Form **990** (1999) 70 G- 13

(73,370)

	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundralsing
2	Grants and allocations (attach schedule)	1				
	(cash \$)	22			'	,
23	Specific assistance to Individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				<u> </u>
25	Compensation of officers, directors, etc	25				
5	Other salaries and wages	26		3,844,058		1,252,436
? 7	Pension plan contributions	27_	319,387		49,467	58,182
28	Other employee benefits	28	475,449		58,039	
29	Payroli taxes	29	434,752	300,524	46,788	87,440
30	Professional fundralsing fees	30			F 0 000	
31	Accounting fees	31	50,000		50,000	
2	Legal fees	32	99,093	48,728	47,839	2,526
3	Supplies	33	171,894	59,879		18,100
34	Telephone	34	232,452	142,608	26,105	63,739
55	Postage and shipping	35	268,445	131,266	26,765 124,330	110,414
36	Occupancy	36	373,247 259,067	248,917 192,672	48,378	18,017
7 8	Equipment rental and maintenance	38	547,925	501,876	1,076	44,973
39	Travel	39	307,435	226,797	67,999	12,639
10	Conferences, conventions, and meetings	40	113,222	48,137	25,132	39,953
11		41	89,264	40,137	89.264	33,333
12	Interest	42	1,515,526		89,264 1,515,526	
13	Other expenses (itemize): a <u>Statement 6</u>	43a	13,958,328			1,203,717
ь	Outer expenses (normae), a Document	43b		12,310,173	3707 230	272037724
C		43c				
d		43d				
e		43e			···	
_	Total functional expenses (add lines 22 through 43) Organizations					1
14						
14 	completing columns (B) - (D), carry these totals to lines 13 - 15	44	25,001,125	18,677,826	3,336,204	2,987,095
Rep	completing columns (B) - (D), carry these totals to lines 13 - 15 orting of Joint Costs. — Did you report in column atlanta campaign and fundraising solicitation?	(B) (P	rogram services) a	any joint costs fror	n a combined ·····►	☐ Yes 👿 N
Rep educ	completing columns (B) - (D), carry these totals to fines 13 - 15 orting of Joint Costs. — Did you report in column atland campaign and fundraising solicitation?	(B) (P	rogram services) a	any joint costs from mount allocated to Pro	n a combined gram services \$	☐ Yes 👿 N
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epiduc "Yes "Yes "I) th organism sues ust a	completing columns (B) - (D), earry these totals to lines 13-15 orting of Joint Costs. — Did you report in column atlonal campaign and fundraising solicitation? ," enter (i) the aggregate amount of these joint costs \$ e amount allocated to Management and general \$ It iii Statement of Program Service Acco t is the organization's primary exempt purpose? > 1 anizations must describe their exempt purpose achievements in a letc. Discuss achievements that are not measurable. (Section 5 also enter the amount of grants and allocations to others.) Statement 8 (G	mplis Stat clear ar 01(0)(3) Frants Frants Frants	; (ii) the a ; and (iv) the ar ; and (iv) the ar ; and (iv) the ar hments (See Spement 7 d concise manner. Sta and (4) organizations and allocations \$ and allocations \$ and allocations \$ and allocations \$	any joint costs from	n a combined gram services \$ draising \$ on page 22.) served, publications mpt charitable trusts))	Program Service Expenses (Required for 501 (c)(3) and (4947(e)(1) fuests; but optional for others.)

Note:	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
45	Cash — non-interest-bearing	374,313	45	151,611
46	Savings and temporary cash investments	3,924,823	46	3,564,802
47a	Accounts receivable			
b	Less: allowance for doubtful accounts 47b 65, 255	3,381,743	47c	1,538,884
48a	Pledges receivable			
	Less: allowance for doubtful accounts 48b		48c	•
49	Grants receivable		49	
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach	· · · · · · · · · · · · · · · · · · ·		
0	schedule)			
On I	Less: allowance for doubtful accounts 51b		51c	
	the state of the s	385,973	52	458,051
53	Prepaid expenses and deferred charges	3,594,989	53	1,014,015
54	Investments — securilies (attach schedule) Statement 9	1,283,328	54	2,670,090
55a	Investments — land, buildings, and equipment: basis			
b	Less: accumulated depreciation (attach	17	۱۰. ۱	
	schedule)	,*·	55c	
56		(694,755)	56	(759,223
	Land, buildings, and equipment: basis 57a 29,357,598	and the first bar	id bi	41 TH
b	Less: accumulated depreciation (attach	0.010.704		0 405 106
	schedule) Statement 5 57b 19,861,469	8,813,731		9,496,129
5 8	Other assets (describe > Statement 11)	1,188,326	58	1,056,623
59	Total assets (add lines 45 through 58) (must equal line 74)	22,252,471	·59:	19,190,982
60	Accounts payable and accrued expenses	3,155,754	60	2,288,617
61	Grants payable	(34	61	
62	Deferred revenue Statement 12	4,224,431	62	1,297,181
63 64a	Loans from officers, directors, trustees, and key employees (attach schedule)	1.7	63	
648	Tax-exempt bond liabilities (attach schedule)	····	64a	
э Б	Mortgages and other notes payable (attach schedule) Stmt. 13	1,312,500	64b	1,237,500
65	Other liabilities (describe >)		65	
66	Total liabilities (add lines 60 through 65)	8,692,685	66	4,823,298
· -	anizations that follow SFAS 117, check here ▶ ☑ and complete lines 67 through 69 and lines 73 and 74.			
8 ₆₇	Unrestricted Statement 12	9,360,358	67	9,643,764
67 68 69 69	Temporarily restricted	4,055,952	68	4,520,327
69	Permanently restricted.	143,476	69	203,593
3 0	anizations that do not follow SFAS 117, check here ▶ □ and	143,470	09	203,393
Org	complete lines 70 through 74.		·	
70	Capital stock, trust principal, or current funds		70	
	Paid-in or capital surplus, or land, building, and equipment fund	· · · · · · · · · · · · · · · · · · ·	71	· · · · · · · · · · · · · · · · · · ·
72	Retained earnings, endowment, accumulated income, or other funds		72	
71 72 73 73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must			
ا"	equal line 21)	13,559,786	73	14,367,684
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	22,252,471	74	19,190,982

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

	990 (1999) , rt IV-A Reconciliation of Reven	lie n	er Διμάϊταά	pa-	t IV-B	06-07589 Reconciliation		200	Page 4
	Financial Statements wi			Fai	(IV-D	Financial St			
	Return (See Specific Inst	ructio	ons, page 24.)			Return			·
а	Total revenue, gains, and other support per audited financial statements >	а	27,85 <u>5,389</u>	а		penses and losse financial stateme		а	27,047,491
b	Amounts included on line a but not on line 12, Form 990:			b		ts included on line 17, Form 990:	a but not		
(1)	Net unrealized gains on investments \$, ,		(1)) Donale	d services	423,211]	
(2)	Donated services and use of facilities \$ 423,211			(2)	Prior ye	ear adjustments d on line 20,	1 23,211		
(3)	Recoveries of prior			/01	Form 9	90 <u>\$</u>			
(4)	year grants \$ Other (specify):		,	` '	line 20,	reported on Form 990 . \$		ľ	
	Stmt 14 \$ 1,549,785			(4)	Other (:				,
	Add amounts on lines (1) through (4) ▶	ь	1,972,996		Stmt		,623,155	٠.	
_	Line a minus line b					ounts on lines (1)		Ь	2,046,366
d	Amounts included on line 12.	C	25,882,393	d d		minus line b ts included on line	•	C	25,001,125
	Form 990 but not on line a: Investment expenses				Form 9	90 but not on line nent expenses			
(1)	not included on line			"		uded on line			
	6b, Form 990 \$					m 990 \$			<u>.</u>
(2)	Other (specify):	.		(2)	Other (specify):			
	<u>\$</u>					<u> </u>			
•	Add amounts on lines (1) and (2).	d	7			ounts on lines (1)		d	<u> </u>
е	Total revenue per line 12, Form 990 (line c plus line d)	8	25,882 <u>,393</u>	e		penses per line 1 plus line d)		e	25,001,125
Pa	rt V List of Officers, Directors, see Specific Instructions on			Emp	loyees	(List each one e	even if not co	mpe	ensated;
	(A) Name and address		(B) Title and av			(C) Compensation (if not paid, enter -0)	(D) Contributions employee benefit ple deferred compense	ins &	(E) Expense account and other allowances
	ry Franklin			•	4.0				
	Crosswood Road, Farmington, garet Sakellarides	CT	President	-/CE	o 40	<u>231,629</u>	35,45	8	0
66	Sea Island, Glastonbury, CT Roberts		Treasure	c/CF	o 40	120,846	13,29	90	0
	-5 Farmington Ave. Unionville,	СТ	Asst Seci	reta	ry 40	37,373	8,45	33	0
					•				
						. .			_
				•					
					**				
					- l	an \$100,000 from you			

25 (40%)

Par	t VI Other Information (See Specific Instructions on page 25.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		x
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		×
	if "Yes," attach a conformed copy of the changes.			
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	$ \mathbf{x} $	
	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	×	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		×
80a	is the organization related (other than by association with a statewide or nationwide organization) through common	-	\vdash	
000	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	x	
ь	If "Yes," enter the name of the organization MediaVision Productions, Inc.		_	
	and check whether it is exempt OR x nonexempt.			
81a	Enter the amount of political expenditures, direct or indirect, as described in the			l
	Instructions for line 81			l
b	Did the organization file Form 1120-POL for this year?	81b		x
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or			
	at substantially less than fair rental value?	82a	x	
b	If "Yes," you may indicate the value of these items here. Do not include this amount			
	as revenue in Part I or as an expense in Part II. (See instructions for reporting in	,		
	Part III.)			
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	<u> </u>	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	⊢—
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	<u>x</u>	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	0.45		
	gifts were not tax deductible?	84b	×	\vdash
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	2 3 W	i (čis	
_	received a waiver for proxy tax owed for the prior year.	a a		ĺ.
_	Dues, assessments, and similar amounts from members	3, 14		ľ
d				ĺ
9	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	permits.		
		0E		1
9	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g		ļ
"	dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		ĺ
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a N/A			
	Gross receipts, included on line 12, for public use of club facilities			ĺ
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other			
	sources against amounts due or received from them.)			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or			l
	partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2			
	and 301.7701-3? If "Yes," complete Part IX	88	x	
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			ŀ
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction			ŀ
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a		1	
		89b		х
	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			0
_	sections 4912, 4955, and 4958			
	List the states with which a copy of this return is filed Connecticut		<u>-</u>	42
_	Number of employees employed in the pay period that includes March 12, 1999 (See inst.) 90b	<u> </u>		42
91	The books are in care of ▶ Meg Sakellarides, CFO Telephone no. ▶ 860 278-	· <u> </u>	. <i>u</i>	
	Localed at ≥ 240 New Britain Ave. Hartford, CT ZIP + 4 ≥ 06106-3185			<u> </u>
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here	• • • •	•	· L
	and enter the amount of lax-exempt interest received or accrued during the tax year N/A > 92			

Part	Vii Analysis of Income-Pro	ducing A			ions on page	29.)	
Enter	gross amounts unless otherwise		Unrelated bu	siness income	Excluded by sect	on 512, 513, or 514	(E)
indica	ated.		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt function income
93 a	Program service revenue:		 				
b		<u></u>					
C					<u> </u>		
d		-					
e							
f	Medicare/Medicaid payments						
g	Fees and contracts from government agen-						
94	Membership dues and assessmen						
95	Interest on savings and temporary cash inv				14	31,523	
96	Dividends and Interest from securi				14	92,843	
97	Net rental income or (loss) from re				-		
а	debt-financed property						
b	not debt-financed property						
98	Net rental income or (loss) from personal p						
99	Other investment income			_			
100	Gain or (loss) from sales of assets other the				<u> </u>		
101	Net income or (loss) from special		561520	(20,978)		393,253	
102	Gross profit or (loss) from sales of				41	(154, 237)	
103	Other revenue: a Statement	<u> 15</u>		89,192			275,120
b							
C			ļ			<u></u>	
, d					1.5		
е	W	.		22.22.1		260 200	000 100
104	Subtotal (add columns (B), (D), an	d (E))		68,214		<u>::363,382 </u>	<u>275,120</u>
105	iotai (add line 104, columns (b), (ν), and (Ε))) <u></u>			399 > 3 <u>- 2 - 2</u>	706,716
Note:	Line 105 plus line 1d, Part I, should						
Part							
Line ▼	organization's exempt purposes (other than by	providing funds for	such purposes).	*		
103		ed from	n the sale	of trans	mission	services i	n the
	furtherance of p	ublic a	and educat	ional bro	adcastin	g.	<u> </u>
103						ing our faci	<u>lities in </u>
· <u> </u>	furtherance of their	<u>public</u>	and educat	<u>ional broad</u>	casting.	·	
103				to assis	t educat	ional, pub	lic
,	service and awar	eness :	orograms.				····
						· · · · · · · · · · · · · · · · · · ·	
							···
							·
-	324				/O O	en - t a al	
Part		able Subs					
	(A) Name, address, and EiN of corporation	n	(B) Percentage of		(C) of activities	(D) Total income	(E) End-of-year
	partnership, or disregarded entity	·-•	ownership interest				assels
Medi	iaVision Productions	Inc.	100 %	Production	Company	(73,370)	268,202
	New Britain Avenue		%				
	tford, CT 06106 A		%		•	1	
	1044665		%				
			rn, inclu	ding accompanying (chedules and state	ments, and to the best	of my knowledge

2 15 4

on all information of which preparer has any knowledge Meg Sakellarides

<u>Chief Financial Officer</u>

Type or print name and title.

SCHEDULE A (Form 990)

CONNECTICUT PUBLIC BROADCASTING,

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

1999

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ. Name of the organization Employer Identification number

06-0758938

Compensation of the Five Highest Pald Employees Other Than Officers, Directors, and Trustees Part I (See page 1 of the instructions. List each one. If there are none, enter "None.") (d) Contributions to (c) Expense (b) Title and average hours (a) Name and address of each employee paid more (c) Compensation nployee benelit plans 8 account and other per week devoted to position deferred compensation allowances Donna Collins VP Marketing 2 Basswood Court Rocky Hill; CT 06067 40 169,522 11,940 0 Lawrence Rifkin VP Programming 21 Holley Lane Prospect, CT 06712 40 129,692 20,258 0 Gail Stone Senior Marketing Mgr 4 Jobs Gate 1 Portland, CT 06480 6,201 40 102,047 0 Steven Futernick Sr VP Strtgc Dvlpmnt 49 North Beacon Street Hartford, CT 06105 40 96,264 15.793John Berky VP Radio 21 Juniper Road Windsor, CT 06095 40 7,896 Total number of other employees paid over est mesperal eller 42

Part II Compensation of the Five Highest Pald Independent Contractors for Professional Services (See page 1 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service 49.2011 (c) Compensation
Lyrick Studios/Lyons Group	
PO Box 910867	
Dallas, TX 75391-0867	Independent Producer 1,546,548
Public Broadcasting Service PO Box 75387	-
Charlotte, NC 28275-0387	Independent Producer 1,441,428
Connecticut Public Affairs Network, Inc. 221 Main Street, Suite 501 Hartford, CT 06106	Independent Producer 735,525
Media Management Services 105 Terry Drive, Suite 120 Newtown, PA 18940-3425	Educational Outreach 510,565
National Public Radio Department #5005 Washington, DC 20061-5005	Independent Producer 420,663
Total number of others receiving over \$50,000 for professional services	

For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990) 1999

ISA STF FED1955F.1

				T	T-
Pa	rt III	Statements About Activities		Yes	No
1	During	the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence			
		opinion on a legislative matter or referendum?	1	<u> </u>	x
		" enter the total expenses paid or incurred in connection with the lobbying activities > \$	١.		1
		ng "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		l	l
					١.
2		the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees,	İ		
		rs, officers, creators, key employees, or members of their families, or with any taxable organization with which any such is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:			
	polaci		l	Į .	ļ
а	Sale, a	xchange, or leasing of property?	2a		×
		+ (4)			
b	Lendin	g of money or other extension of credit?	2b		x
		ning of goods, services, or facilities? Statement 16	1.		1
C	Furnis	ning of goods, services, or facilities?	2c	X	ļ
d	Payme	nt of compensation (or payment or reimbursement of expenses if more than \$1,000)? Statement 17	2d	x	1
_	· wyiin			^	
8	Transf	er of any part of its income or assets?	20		x
	If the a	nswer to any question is "Yes," attach a detailed statement explaining the transactions.			
3		ne organization make grants for scholarships, fellowships, student loans, etc.?	3 4a		x
4a		have a section 403(b) annulty plan for your employees?	48	x	<u> </u>
D	further	a statement to explain now the organization determines that individuals of organizations receiving grains of idants from it in ance of its charitable programs qualify to receive payments. (See page 2 of the instructions.) Not Applicable			
Pai	t IV	Reason for Non-Private Foundation Status (See pages 2 through 4 of the instructions.)		•	
The	organiza	tion is not a private foundation because it is: (Please check only ONE applicable box.)	جا بتلغب	. Paga	et para
5	□ A	church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 4.) nospital of a cooperative hospital service organization. Section 170(b)(1)(A)(iii).	Post of	254	E Co
6	A	school. Section 170/h)(1)(A)(ii) (Also complete Part V. page 4.)		, and the second	eg inde
7		respital at a concentive presital sender organization. Section 170/hV1VAVIII)			
•		Today and a decopality in the property of the degratical of the second o		, ,	
8		Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			•
9 .	LJ A	nedical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, c	ity,	,	
		d state ▶			
10		organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A Support Schedule in Part IV-A.))(iv). (A	lso co	mplete
11a		organization that normally receives a substantial part of its support from a governmental unit or from the general public. Sect so complete the Support Schedule in Part IV-A.)	ion 170	(b)(1)(A)(vi).
116	,	community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12		organization that normally receives: (1) more than 331/1% of its support from contributions, membership fees, and gross re-	sointe f	on ec	tivitico
12	™ لــا rel	ated to its charitable, etc., functions — subject to certain exceptions, and (2) no more than 33½% of its support from gross inv	esimen esimen	tineon	ne and
		related business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. Se			
	(A	so complete the Support Schedule in Part IV-A.)			
13		organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations d brough 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)	escribe	d in; (1) lines
		Provide the following information about the supported organizations. (See page 4 of the instructions.)			
		(a) Name(s) of supported organization(s) (b) Line	numbe above	er	
	_	non			
	_				
	_			_	
		<u> </u>	_		
1.6	П	organization organized and operated to test for public safety. Section 509(a)(4), (See page 4 of the instructions.)			
14	<u> </u>	organization organization and operation to less for public salety. Section 308(8)(4), (306 page 4 or the mandotions.)			<u> </u>

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. Calendar year (or fiscal year beginning in) (a) 1998 (b) 1997 (c) 1996 (d) 1995 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)..... 17,960,162 25,283,673 24,456,904 14,511,129 82,211,868 Membership fees received Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose 1,850,272 1.882.213 1,954,087 1,289,721 6,976,293 Gross Income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by 332,242 280,444 286,416 132,816 1,031,918 Net Income from unrelated business activities not Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets Statement, 18... 327,284 408,177 979.157 674.893 2.389.511 23 20.057,592 27,793,471 27,027,738 730.789 92,609,590 18,767,871 25,943,199 25,145,525 15.776.702 20<u>0</u>5 25 Enter 1% of line 23 277,935 270,277 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (others and than a governmental unit or publicly supported organization) whose total gifts for 1995 through 1998 exceeded the amount shown in line 25a. Enter the sum of all these excess amounts. c Total support for section 509(a)(1) test: Enter line 24, column (e) 85,633,297 18 1,031,918 ₁₉ ____ Out 12 leaves d Add: Amounts from column (e) for lines: 22 2,389,511 26b 22,757,987 26d 26,179,416 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year.

Not Applicable __ (1997) _ b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as Individuals.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: ____(1997) _______(1996) _______ (1998)c Add: Amounts from column (e) for lines: d Add: Line 27a tótal . . . ______ 27d a Public support (line 27c total minus line 27d total) g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1995 through 1998, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See page 4 of the Instructions.) Not Applicable

Private School Questionnaire (See page 4 of the instructions.) Part V Not Applicable (To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes No Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bytaws, other governing 29 instrument, or in a resolution of its governing body? 29 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, 30 30 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: 32a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 32b c. Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32c d Copies of all material used by the organization or on its behalf to solicit contributions? 32d filf you answered "No" to any of the above, please explain, (if you need more space, attach a separate statement,) " after restable to the control of the co A STATE OF S Does the organization discriminate by race in any way with respect to: a. Students' rights or privileges? b Admissions policies? 33h c Employment of faculty or administrative staff? d Scholarships or other financial assistance? 33d e Educational policies? 33e Use of facilities? ... 231 **33**g Athletic programs? 33h h Other extracurricular activities? if you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev.

4 34 3

	ule A (Form \$90) 1999 t VI-A Lobbying Expenditures by Electi	ing Public Ch				Ann 7 i	•	-	
	(To be completed ONLY by an eligi		on that filed Fo	orm 5768)	Not	- upp_1	lcal)16	
	: here ▶ a ☐ if the organization belongs to an affilia : here ▶ b ☐ if you checked "a" above and "limited		s anniv.						
	Limits on Lobbying		<u> </u>			(a) Affiliated g totals		(b) To be comp for ALL ele	
	(The term "expenditures" means	amounts paid or in	curred.)			Mais		organizati	
	Total lobbying expenditures to influence public opinion (gr				36				
	Total lobbying expenditures to influence a legislative body				37				
	Total lobbying expenditures (add lines 36 and 37)				38				
	Other exempt purpose expenditures				39				
	Total exempt purpose expenditures (add lines 38 and 39)				40				
	Lobbying nonlaxable amount. Enter the amount from the f								•
	If the amount on line 40 is The lob! Not over \$500,000	bying nontaxable		_					
	Over \$500,000 but not over \$1,000,000 \$100,000				1.			·	
	Over \$1,000,000 but not over \$1,500,000 \$175,000	•	-		41				
	Over \$1,500,000 but not over \$17,000,000 \$225,000	•			 71				
	Over \$17,000,000\$1,000,0								
	Grassrools nonlaxable amount (enter 25% of line 41)				42	•			•
3 :	Subtract line 42 from line 36. Enter -0- if line 42 is more th	nan line 36			43				
	Subtract line 41 from line 38. Enter -0- If line 41 is more th	nan line 38			44				
	Caution: If there is an amount on either line 43 or line 44,	you must file For	m 4790						
	(Some organizations that made a section 5 See the instructions for	501(h) election o		omplete all					
	(Some organizations that made a section 5	501(h) election of lines 45 through	to not have to d	omplete all of the instru	<u>ictions</u>	.)			
	(Some organizations that made a section 5	501(h) election of lines 45 through	to not have to on 50 on page 7	omplete all of the instru	dions 4-Yea	.)	j Perio		ngo stantuc
1	(Some organizations that made a section 5 See the instructions for Calendar year (or fiscal year beginning in) ▶	501(h) election of lines 45 through Lo	to not have to on 50 on page 7 on page 7 on page 7 on page 7 (b)	omplete all of the instru tures During (c)	dions 4-Yea	r Averaging	j Perio	(e)	
1	(Some organizations that made a section 5 See the instructions for	501(h) election of lines 45 through Lo	to not have to on 50 on page 7 on page 7 on page 7 on page 7 (b)	omplete all of the instru tures During (c)	dions 4-Yea	r Averaging	j Perio	(e)	ngo stantuc
1	(Some organizations that made a section 5 See the instructions for Calendar year (or fiscal year beginning in) ▶	501(h) election of lines 45 through Lo	to not have to on 50 on page 7 on page 7 on page 7 on page 7 (b)	omplete all of the instru tures During (c)	dions 4-Yea	r Averaging	j Perio	(e) Total	
	(Some organizations that made a section 5 See the instructions for Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount	501(h) election of lines 45 through Lo	to not have to on 50 on page 7 on page 7 on page 7 on page 7 (b)	omplete all of the instru tures During (c)	dions 4-Yea	r Averaging	j Perio	(e) Total	iss variue
5 L	(Some organizations that made a section 5 See the instructions for Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount Lobbying celling amount (150% of line 45(e))	501(h) election of lines 45 through Lo	to not have to on 50 on page 7 on page 7 on page 7 on page 7 (b)	omplete all of the instru tures During (c)	dions 4-Yea	r Averaging	j Perio	(e) Total	iss variue
1 5 L 7 T	(Some organizations that made a section 5 See the instructions for Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))	501(h) election of lines 45 through Lo	to not have to on 50 on page 7 on page 7 on page 7 on page 7 (b)	omplete all of the instru tures During (c)	dions 4-Yea	r Averaging	j Perio	(e) Total	iss variue
155 (155 (157 17 17 17 17 17 17 17 17 17 17 17 17 17	(Some organizations that made a section 5 See the instructions for See the instructions for Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount Lobbying calling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots celling amount (150% of line 48(e)) Grassroots lobbying expenditures	501(h) election of lines 45 through Lo (a) 1999	do not have to on 50 on page 7 obbyling Expend (b) 1998	omplete all of the instru tures During (c)	dions 4-Yea	r Averaging	j Perio	(e) Total	iss variue
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(Some organizations that made a section of See the instructions for See the instructions of See the instruction of See th	(a) 1999 Public Char	do not have to on 50 on page 7 obbying Expendicular (b) 1998	complete all of the instru itures During (e) 1997	J 4-Yea	r Averaging (d) 1996	j Perio	(e) Total	iss variue
i l	(Some organizations that made a section of See the instructions for See the instructions of See the instructions for See the instructions of See the instructions for See the instructions for See the instructions for See the instructions for See the instruction in See the instructions for See the instruction in See the instruction in See the instruction for See the instruction in See the instr	g Public Char	to not have to on 50 on page 7 (abbying Expend) (b) 1998 ities complete Part	complete all of the instructures During (e) 1997	y 4-Yea	r Averaging (d) 1996	j Perio	(e) Total	iss variue
i li	(Some organizations that made a section of See the instructions for See the instructions of See the instructions for See the instructions of See the instructions of See the instructions (See the instructions of See the instruction	g Public Chars that did not could be of:	to not have to on 50 on page 7 obbying Expendicular (b) 1998 ities complete Part Visitation, including its complete complete.	complete all of the instructures During (c) 1997	page	(d) 1996 8 of the i	nstru No	(e) Total	See Vice VC
l l l l l l l l l l l l l l l l l l l	(Some organizations that made a section of See the instructions for See the instructions (Isomethyland See the instruction (Isomethyland See the Isomethyland See the Isomethyla	g Public Char that did not coll, state or local legituse of:	ities omplete Part \ islation, including :	omplete all of the instructures During (c) 1997	page	(d) 1996 8 of the i	nstru No	d (e) Total	See Vice VC
I L L L L L L L L L L L L L L L L L L L	(Some organizations that made a section of See the instructions for See the instructions (Issue 1998). Lobbying celling amount (150% of line 45(e))	g Public Char that did not come of:	to not have to on 50 on page 7 obbying Expendicular (b) 1998 ities complete Part Visitation, including the complete of the co	omplete all of the instructures During (c) 1997	page	8 of the i	nstru No	d (e) Total	See Vice VC
I ((((((((((((((((((((Some organizations that made a section of See the instructions for See the instructions (Iscal year beginning in) ▶ Lobbying amount (150% of line 45(e))	g Public Chart that did not collines of:	ities omplete Part vislation, including	omplete all of the instructures During (c) 1997	page	8 of the i	nstru No X X	d (e) Total	See Vice VC
ing lic of the control of the contro	(Some organizations that made a section of See the instructions for See the instructions (Iscal year beginning in) ▶ Lobbying celling amount (150% of line 45(e))	g Public Char that did not colluse of:	ities omplete Part visitation, including inclu	omplete all of the instructures During (e) 1997	page	8 of the i	nstru No X X	d (e) Total	1 See 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
() () () () () () () () () () () () () ((Some organizations that made a section of See the instructions for See the instructions in the 45(e)). Lobbying celling amount (150% of line 45(e)) Grassroots celling amount (150% of line 48(e)) Grassroots lobbying expenditures VI-B Lobbying Activity by Nonelecting (For-reporting only by organizations of the year, did the organization attempt to influence national opinion on a legislative matter or referendum, through the volunteers. Pald staff or management (include compensation in expended advertisements Mallings to members, legislators, or the public Publications, or published or broadcast statements	g Public Char s that did not colleguse of:	ities complete Part visitation, including incl	omplete all of the instructures During (e) 1997	page	8 of the i	nstru No X X X	d (e) Total	See Vice VC
I L L L L L L L L L L L L L L L L L L L	(Some organizations that made a section of See the instructions for See the instructions of See the instructions (Isomething amount (150% of line 45(e))	g Public Char s that did not collines of:	to not have to on 50 on page 7 (abbying Expend) (b) 1998 ities complete Part Visitation, including the complete of through h.)	omplete all of the instructures During (e) 1997	page	8 of the i	nstru No X X X X	d (e) Total	See Vice VC
I ((((((((((((((((((((Some organizations that made a section of See the instructions for See the instructions (Iscal year beginning in) ▶ Lobbying calling amount (150% of line 45(e))	g Public Char that did not co d, state or local legiuse of:	ities omplete Part visitation, including inclu	omplete all of the instructures During (c) 1997	page o influer	8 of the i	nstru No X X X X X	d (e) Total	See Vice VC
i (i	(Some organizations that made a section of See the instructions for See the instructions of See the instructions (Isomething amount (150% of line 45(e))	g Public Char that did not co dises reported on lines dicials, or a legislation, lectures, or any co	ities omplete Part visitation, including shown we body on 50 on page 7 on	omplete all of the instructures During (c) 1997	page o influer	8 of the i	nstru No X X X X	d (e) Total	See Vice VC

Schedule A (Form 990) 1999

STF FED1955F.6

51 Did	Exempt Org	llon directly or indirect	ly engage in any of the following wi	ith any other organization described in section 501(c) of	the Cod	
olt (olt	ner than section 501(c)	(3) organizations) or in	n section 527, relating to political or	rganizations?	Inte Coo	re
a Tra	nsfers from the reporting	ng organization to a no	oncharitable exempt organization of	f:	Yes	No
				51a(×
(fi)) Other assets			a(ii)		х
	ner transactions:			L. CO.		
(1) (11)	. •			b(i)	-	X
(III)				b(iii)		X
(iv				b(iv		X
(V)				b(v)		x
(vi)				b(vi)		x
c Sha	aring of facilities, equip	ment, mailing lists, oth	er assets, or paid employees	c	1	х
ass sho	ets, or services given b	y the reporting organi	ele the following schedule. Column zation. If the organization received: assets, or services received: (c)	n (b) should always show the fair market value of the go less than fair market value in any transaction or sharing (d)	ods, other	er ernent,
(a) Line no.	Amount involved	Name of nonc	sharitable exempt organization	Description of transfers, transactions, and sharing an	angemen	ls
	<u> </u>			<u> </u>		
		-		<u> </u>	·	
		** :			-:	
	 					
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· - · · · · · · · · · · · · · · · · · ·			Section 2000			
			· · · · · · · · · · · · · · · · · · ·			
sec		(other than section 5		exempl organizations described in Yes (c)		x] No
	. Name of organiz	alion	Type of organization	Description of relationship		
	•		 			
	· .					
						-

EIN: 06-0758938

Part I, Line 1(d) - Contributors Whose Total Gifts Exceeded \$503,514

Name and Address	Direct Public <u>Support</u>	Indirect Public Support 3,163,366	Government <u>Grants</u>
		2,479,909	
		2,090,033	•
e de la companya della companya della companya de la companya della companya dell	era		1,250,000
e de contra de la contra del la contra del la contra del la contra de la contra del la contra de la contra de la contra del la contra			
	e and some some		1,019,844
			867,000
		833,333	
		666,667	
	0	9,233,308	3,136,844

Connecticut Public Broadcasting, Inc. Year Ended June 30, 2000 Schedule Attached to Form 990, Schedule A EIN: 06-0758938

Part IV-A, Line 26(b) - Contributors Whose Total Gifts for 1995 through 1998 Exceeded \$1.712,666

Contributor	<u>1995</u>	<u>1996</u>	<u>1997</u>	<u>1998</u>	<u>Total</u>	<u>Excess</u>
	1,859,352	3,371,814	885,513	2,732,285	8,848,964	7,136,298
	1,862,114	1,696,835	1,585,637	1,443,397	6,587,983	4,875,317
	593,202	361,875	2,525,018	1,580,509	5,060,604	3,347,938
	0	0	0	4,285,000	4,285,000	2,572,334
	0	300,000	3,345,000	0	3,645,000	1,932,334
	650,000	850,000	850,000	873,000	3,223,000	1,510,334
	721,376	25,733	1,122,412	639,243	2,508,764	796,098
	960,000	340,000	500,000	500,000	2,300,000	587,334
	6,646,044	6,946,257	10,813,580	12,053,434	36,459,315	22,757,987

Connecticut Public Broadcasting, Inc.
Year Ended June 30, 2000

Year Ended June 30, 2000 Statement Attached to Form 990

Part I, Line 9 - Special Events and Activities

<u>Description</u>	Gross Revenue <u>Line 9a</u>	Direct Expenses <u>Line 9b</u>	Net Income <u>Line 9c</u>
General Auction	580,432	161,249	419,183
Connecticut Public Radio France Food Tour	170,773	189,906	(19,133)
Connecticut Public Radio Music Tour	92,777	112,149	(19,372)
Other Special Events	371,816	380,219	(8,403)
Totals	1,215,798	843,523	372,275

EIN: 06-0758938

EIN: 06-0758938

Part I, Line 10b - Cost of Goods Sold

torrestant a Banka to the Market	205 270
Inventory at Beginning of the Year	385,973
Purchases	336,428
Salaries and Wages	96,166
Other Costs	215,130
Subtotal	1,033,697
Less Inventory at End of the Year	458,051
Cost of Goods Sold	575,646

EIN: 06-0758938

Part I, Line 20 - Other Changes in Net Assets or Fund Balances

<u>Description</u>

<u>Amount</u>

Loss from Consolidated Subsidiary

(73,370)

Part II, Line 42 - Depreciation Expense and Part IV, Line 57 - Land, Buildings and Equipment

	<u>Cost</u>	Depreciation Expense	Accumulated Depreciation @ 6/30/00	Net Book <u>Value</u>
Land and Buildings	1	0	0	1
Land improvements	7,281	240	4,334	2,947
Building on Leased Ground	3,579,007	123,125	1,282,538	2,296,469
Equipment	25,666,348	1,392,161	18,521,096	7,145,252
Leasehold Improvements	53,501	0	53,501	0
Construction in Progress	51,460	0	0	51 ,460
Totals	29,357,598	1,515,526	19,861,469	9,496,129

Depreciation of buildings and equipment is computed using the straight-line method over the estimated useful lives of the assets. Amortization of leasehold improvements is computed using the straight-line method over the lesser of the lease term or the estimated useful lives of the improvements.

EIN: 06-0758938

EIN: 06-0758938

Connecticut Public Broadcasting, Inc. Year Ended June 30, 2000 Statement Attached to Form 990

Part II, Line 43 - Other Expenses

<u>Description</u>	<u>Total</u>	Program <u>Services</u>	Management <u>& General</u>	Fundraising
Talent Services	287,162	275,307	1,000	10,855
Creative Services	750,575	746,575	4,000	. 0
Production Services	6,436,066	6,408,333	320	27,413
Technical Consulting	8,850	4,924	3,926	0
Research	132,821	100,353	0	32,468
Other Professional Services	1,503,097	842,398	54,754	605,945
Premiums and Pledge Samples	402,479	16,406	257	385,816
Sets and Staging	58,740	58,199	0	541
Outside Technical Services	94,893	62,612	7,439	24,842
Miscellaneous	80,061	83,434	(10,374)	7,001
Program Acquisition	2,387,173	2,387,724	0	(551)
Space Rental	448,199	374,518	73,581	100
Advertising	606,942	595,846	1,393	9,703
Dues and Subscriptions	97,092	35,003	59,599	2,490
Donations	58,225	0	58,175	50
Insurance	59,180	716	58,464	. 0
Bank and Credit Card Fees	78,070	0	1,341	76,729
Bad Debts	73,823	117	55,466	18,240
Network/Organization Membership	383,116	380,551	644	1,921
Vehicle Expense	11,764	5,159	6,451	154
Totals	13,958,328	12,378,175	376,436	1,203,717

EIN: 06-0758938

Part III - Organization's Primary Exempt Purpose

This organization's primary exempt purpose is to provide nonprofit and noncommercial television and radio services and facilities to serve the needs of the Connecticut community and to contribute to the advancement of educational programs.

Part III, a - Statement of Program Service Accomplishments

Connecticut Public Radio (CPR) actively produces programs every year dealing with issues of concern to our communities of license. Topics range from medical and health issues, to concerns about the environment, education and the support of the arts.

The following are initiatives deserving special mention for fiscal year 2000:

CPR continued its monthly Alcoholics Anonymous Open Information Meetings on the air. These call-in programs featured members of AA and callers were given encouragement and help. We have received communication from listeners that this program has helped them manage their addiction or cope with family members who suffer from this misunderstood disease. Interestingly, the vehicle of radio, where one can call in without seeing other people, can actually be more anonymous and less threatening than a local meeting. It provides a stepping stone to more active participation.

Music Education outreach continued unabated. Ten radio reports on the important connection between music education and academic performance were produced and distributed to over 450 public radio stations on CD. These will be aired in March 2001 as part of "Music in Our Schools Month".

For the second year in a row, CPR was singled out by the Associated Press as the best news station in the state thereby receiving the Mark Twain Award for Station Excellence. Several first prize awards were won to ensure the top honor.

Approximately 200,000 people tune into CPR every week. Our average quarter hour audience is 15,000 people (Spring '00 Arbitron/RRC).

In fiscal year 2000, Connecticut Public Television (CPTV) continued to provide a diverse offering of locally produced programming encompassing education, art, history, performance and the humanities. The bi-weekly, news magazine format *Connecticut Journal* offered stories on an eclectic selection of topical stories of local interest.

Government and legislative issues, continued to be discussed in *On the Record, The Future Congress 2000, The State of the State* and *Capitol Leaders Q & A* and other public affairs specials. *Mosquitoes & West Nile Virus* provided CPTV viewers with a forum to deal with health issues regarding the West Nile virus. We continued our historical chronicle of the black experience in Connecticut with the second installment of *African Americans in Connecticut: Civil War to Civil Rights*.

Fans of women's collegiate basketball were thrilled with coverage of the UConn Huskies basketball games. Viewers got an inside look at players and teams with *The Geno Auriemma Show, UConn Athletics with Lew Perkins* and *The Randy Edsall Show*. In addition, sports stories profiling Connecticut natives could be found in *CT Sports Heroes*.

In the arena of arts & culture, *Positively CT* placed the spotlight on areas of interest in our state. CPTV featured performances by John Sebastian and Al Kooper & the Rekooperators entitled *First Saturday*. Local comedians were featured in the *CT Comedy Festival*. On a more serious note, CPTV revisited seminal incidents in its history with the *Hartford Circus Fire* and *New England and The Civil War*.

According to Nielson Media Research, 400,000 households tuned in to Connecticut Public Television on any given week in fiscal year 2000.

EIN: 06-0758938

Part IV, Line 54 - Investments - Securitles

<u>Description</u>	Market <u>Value</u>
Cash and Cash Equivalents: Federated Prime Obligations	489,580
Common Stocks: Sun Microsystem Other Common Stocks Total Common Stocks	13,641 256,153 269,794
Total Equity Mutual Funds	216,142
Total Fixed Mutual Funds	900,961
Total Certificates of Deposit	793,613
Total Investments - Securities	2,670,090

Part IV, Line 56 - Investments - Other

EIN: 06-0758938

	Equity
<u>Description</u>	<u>Method</u>

MediaVision Productions, Inc. (768, 125)**CSRG** Digital LLC 8,902

(759,223) Total Investments - Other

Part IV, Line 58 - Other Assets

<u>Description</u>	<u>Amount</u>
Due from MediaVision Productions, Inc. Due from Employers Matching Gifts Due from Employees	1,029,885 25,453 1,285
Total Other Assets	1,056,623

EIN: 06-0758938

Part IV, Line 62 - Deferred Revenue and Line 67 - Unrestricted

In connection with preparing the fiscal year 2000 financial statements, management identified an overstatement of deferred underwriting revenue of \$468,595 as of June 30, 1998 applicable to prior periods. As such, deferred revenue and net assets as of July 1, 1998 have been restated. This also results in a restatement of deferred revenue from \$4,693,026 to \$4,224,431 and of unrestricted net assets from \$8,891,763 to \$9,360,358 as of June 30, 1999.

EIN: 06-0758938

Part IV, Line 64b - Mortgages and Other Notes Payable

Lender:

State of Connecticut

Date of Note:

September 15, 1996

Interest Rate:

7.00%

Original Amount: Repayment Terms: 1,500,000 Semi-annaual installments of \$37,500, plus interest,

through September 15, 2016

Security Provided:

None

Purpose of Loan:

Finance working capital needs.

Balance Due:

1,237,500

EIN: 06-0758938

Part IV-A - Reconciliation of Revenue per Audited Financial Statements with the Return

Line b(4) - Other Amounts Included on Line a but not on Line 12, Form 990

Contributed In-Kind Support	203,986
Special Events Expenses Reported on Line 9(b)	843,523
Cost of Goods Sold Reported on Line 10(b)	575,646
Loss from Consolidated Subsidiary Reported on Line 20	(73,370)
•	1,549,785

Part IV-B - Reconciliation of Expenses per Audited Financial Statements with the Return

Line b(4) - Other Amounts Included on Line a but not on Line 17, Form 990

Contributed In-Kind Support	203,986
Special Events Expenses Reported on Line 9(b)	843,523
Cost of Goods Sold Reported on Line 10(b)	575,646
	1,623,155

EIN: 06-0758938

Part VII, Line 103 - Other Revenue

<u>Description</u>	(A) Business <u>Code</u>	(B) Amount	(C) Exclusion <u>Code</u>	(D) <u>Amount</u>	(E) Related or Exempt Function Income
Advertising Transmission Sales Rental Income Miscellaneous	541800	89,192			152,602 5,670 116,848
Totals	-	89,192		0	275,120

EIN: 06-0758938

Part III, Line 2c - Explanation About Furnishing of Goods, Services or Facilities

In the ordinary course of business, Connecticut Public Broadcasting, Inc. (the Company) conducts business with other organizations whose executives are members of the Company's Board of Trustees. Transactions, including corporate underwriting revenue support, include amounts from related parties totalling \$3,680,519 in fiscal year 2000.

EIN: 06-0758938

Part III, Line 2d - Explanation About Payment of Compensation

See Part V of Form 990.

Connecticut Public Broadcasting, Inc. Year Ended June 30, 2000 Schedule Attached to Form 990, Schedule A

Part IV-A, Line 22 - Other Income

<u>Description</u>	<u>1998</u>	<u>1997</u>	<u>1996</u>	1995	<u>Total</u>
Transmission Sale Miscellaneous Local/National Projects	162,577 138,734 25,973	200,715 187,741 19,721	130,767 164,603 683,787	281,640 358,516 34,737	775,699 849,594 764,218
	327,284	408,177	979,157	674,893	2,389,511

EIN: 06-0758938

1999 - 2000 **BOARD OF TRUSTEES** CONNECTICUT PUBLIC BROADCASTING, INC.

Officers:

Jerry Franklin - President Meg Sakellarides - Treasurer**
Carl Chadburn - Secretary Kay Roberts - Assistant Sécretary**

**Officer of the Corporation, not a Trustee

Board of Trustees:

Business

Home

GEORGE M. BELLINGER

No Business Address

Consultant

135 Brooklawn Ave. Bridgeport, CT06604 Tel. (203) 384-9228

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10.

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President & CEO

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2

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Publisher & CEO The Hartford Courant

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Hartford Office Arthur Andersen 1 Financial Plaza Hartford, CT 06103 Tel. (860) 280-0503 57 Randy Lane

Wethersfield, CT 06109

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Chairman, President & CEO

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Greenwich, CT 06830

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Executive Vice President

Private Clients Group

Fleet Bank

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66 Sea Island

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THEODORE SERGI (ex-officio)Commissioner of Education

State of Connecticut 165 Capitol Ave.

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11 Castlewood Road

West Hartford, CT 06107

Westport, Connecticut 06880 Tel. (203) 227-1448 (h)

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Tel. (860) 678-2669 (h)

DORIS STORM

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8 West Branch Road Westport, CT 06880

Tel. (203) 227-2220

JACQUELINE STRAYER

Director, Contribution and

Communications Services

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United Technologies Corporation

One Financial Plaza Hartford, CT 06101 Tel. (860) 728-7904

CHEEVER TYLER

The Partnership for Connecticut Cities, Inc.

234 Church Street

New Haven, CT 06510 Tel. (203) 781-3479

45 Lincoln Street

New Haven, CT 06511

Connecticut Public Broadcasting **Board of Trustees** 1999-2000

Form 2	758	Application for Extension of Time To File	
(Rev. June	Certain Excise, Income, Information, and Other Returns		
Department o Internal Rever		File a separate application for each return.	
Please type print. File t	e or Name	n . : .	Employer identification number 06:0718 938
original ar	id one Numbe	er, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address)	
date for fill		o New Britain Avenue	
instructions back.	City, to	own or post office, state, and ZIP code. For a loreign address, see instructions.	
*		ertford, CT 06106	··· .
tru	sts must use .	ne tax return filers must use <mark>Form 7004</mark> to request an extension of time to file. Parti Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.	nerships, REMICs, and
1 <u>l</u> red	quest an exter	nsion of time until (check only one):	•
. 🛄	Form 706-GS(D	Form 990-T (sec. 401(a) or 408(a) trust) Form 1120-ND (sec. 4951 tag	· —
	Form 706-GS(T) Form 990 or 99		☐ Form 8613
_	Form 990-BL	Form 1041-A Form 5227	☐ Form 8725
-	Form 990-PF	☐ Form 1042 ☐ Form 6069	Form 8831
		n does not have an office or place of business in the United States, check this box,	<u>.</u> , . > 🗖
2a For	calendar year	or other tax year beginning בייל מילים, or other tax year beginning ייל אילים, or other tax year beginning ייל אילים, אילים אולים אילים א	ne 30, 2000
b lith	us lax year is	for less than 12 months, check reason: Initial return Final return Change if of time to file been previously granted for this tax year?	in accounting period ☐ Yes ☑No
3 Has	s an extension te in detail wh	vou need the extension () city U.S. Sufficeent Time	∟ires bagino To
e.	Cepare	by you need the extension To give US Sufficient Time	***************************************

		form 706-GS(D), 706-GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720,	- 77
		8725, 8804, or 8831, enter the tentative tax, less any nonrefundable credits. See instructions. Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and	
esti	mated tax pay	renents made. Include any prior year overpayment allowed as a credit	s <u>- 0 - , , , , , , , , , , , , , , , , , </u>
c Bal	ance due. Su	btract line 5b from line 5a. Include your payment with this form, or deposit with FTD d. See instructions	s - 0 -
Under pens it is true, co	alties of perjury, orrect, and compl	Signature and Verification declars that I have examined this form, including accompanying schedules and statements, and to the best pie; and stat. I am authorized to prepare this form.	of my knowledge and belief.
-			1.3
Signature I			Date > 7/5/00
		ONE COPY. The IRS will show below whether or not your application is approved and tTo Be Completed by the IRS	will return the copy.
		red your application. Please attach this form to your return.	
/ □ We	HAVE NOT a	pproved your application. However, we have granted a 10-day grace period from the	e later of the date.
sho	wn below or t	he due date of your return (including any prior externity this grace period is cons	sidered to be a valid
		for elections otherwise required to be made on a timely return. Please attach this co	
		pproved your application. After considering the reasons stated in item 4, we cannot time to file. We are not granting the 10-day grace period.	grant your request for
		der your application because it was filed after the due date of the return for which e	2 1 1 2 2000 Series 1 2 2000
	uested.	der Application propagation than like and the and add of the fermion of	
			OGDE (4)
	Dire	By:	Date
If you wan		form to be returned to an address other than that shown above, please enter the address to which the	ne copy should be sent.
Di	Name		
Please Type or	Number, street	, and room or sulte no. (or P.O. box no. If mail is not delivered to street address)	
Print	City, town or p	oost office, state, and ZIP code. For a foreign address, see instructions.	

EXHIBIT F

Statement of Herbert Bennett Conner

WEEDPILL

4802 FIFTH AVENUE PITTSBURGH, PA 15213 412-622-1300 FAX 412-622-1488 800-876-1316 www.wqed.org

Statement by Herbert Bennett Conner

I am Vice Chair of the WQED PITTSBURGH Board of Directors, and have served as both a Board member and as Chair of the Board's Compensation Committee for several years.

The Compensation Committee is currently comprised of seven individuals. Three are attorneys, one of whom practices in the area of employment benefits and deferred compensation programs; two are corporate presidents (one of a metalworking manufacturer, the other of an investment holding company); one is the Executive Vice President of an international development firm; and the seventh is George L. Miles, Jr., President and CEO of WQED Pittsburgh.

The Compensation Committee meets at least annually, in January, and more frequently as necessitated by new hires and other compensation issues. The function of the Committee is to review salaries and salary increases of the senior management of WQED. It is also responsible for overseeing company-wide salary changes, including whether they are appropriately budgeted and how such changes compare to others in the market.

During fiscal year 2001, the Human Resources Department of WQED undertook a thorough review of the salary structure of WQED's entire staff, including senior management. Several studies of comparable salary structures in other public television organizations were reviewed in conjunction with an in-house evaluation of positions at WQED. The result was the implementation of a new company-wide salary structure which insured that all personnel at WQED were assigned within salary levels graded one through ten, each level specifying a salary range deemed to be appropriate and competitive according to the salary surveys. The Compensation Committee reviewed this overall restructuring, as well as its implications for senior management. It was determined that the restructuring should be approved, and that the salary structure of senior management at WQED PITTSBURGH is comparable to those of public broadcasters that oversee multiple media outlets in markets of similar size to Pittsburgh.

Herbert Bennett Conner

Vice Chair, WQED PITTSBURGH

January 19, 2002